United States Environmental Protection Agency Washington DC 20460

This initial notification information is required by Section 103(c) of the Compre-hensive Environmental Response, Compen-paper. Indicate the letter of the item

Please type or print in ink. If you need

| | be mailed by June 9, 1981. | d must | which applies. | 06 10 | • | | | |
|--------------|---|------------------------------|---|--|--|--|--|--|
| | | | 04 | #108 | OH5-000- | 001-419 | | |
| A | Person Required to Notify: Enter the name and address of the person or organization required to notify. | | Cananal | loctuic Comp | any - Willoughby | , | | |
| | | | | | | Quartz Flant | | |
| | | | Street Euclid & | Campbell Roa | <u>a</u> | | | |
| | | | city Willoughb | у | State Ohio | Zip Code 44094 | | |
| В | Site Location: Enter the common name (if known) and actual location of the site. | | | RAL ELectric | | r | | |
| | | | Name of Site Willou | | | | | |
| | | | Street Euclid | & Campbell | Road | | | |
| 0HD004447694 | | | city Willoughby | county La | ke _{State} Ohio | Zip Code 44094 | | |
| <u>Z</u> 1 | Person to Contact: | | | | | | | |
| | Enter the name, title (if applicable), and | | Name (Last, First and Title) Cunningham, Robert H./Engineer | | | | | |
| | business telephone number of the person | | Phone | (216) 266- | 4028 | | | |
| | to contact regarding information submitted on this form. | | Thore | (210) 200 | 1020 | | | |
| | | | | | - | | | |
|) | Dates of Waste Handling: | | | | | | | |
| | Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site. | | From (Year) June 24, 1976 (Year) | | | | | |
| | Option I: Select general waste type you do not know the general waste encouraged to describe the site in Its General Type of Waste: | sources, you are Resource Co | | servation and Recovery 0 CFR Part 261). | persons familiar with the Act (RCRA) Section 300 | | | |
| | | | X in the appropriate | EPA has assigned a four-digit number to each hazardous we listed in the regulations under Section 3001 of RCRA. Enter appropriate four-digit number in the boxes provided. A copy the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the stocated. | | | | |
| | • | 1. 🗆 Mir | _ | | | | | |
| | - 3 | | nstruction | U134 Ly | Dufter ricacio | | | |
| | | 3. □ Tex 4. □ Fer | | 0 | J/ | | | |
| | | | er/Printing | <u> </u> | - | | | |
| | | • | ther Tanning | | | - | | |
| | | | /Steel Foundry | | | | | |
| | | | emical, General | | ┥ ├── | | | |
| | 9. Mixed Municipal Waste | 9. 🗆 Pla | ting/Polishing | | - | | | |
| | 10. ☐ Unknown 1 | o. 🗆 Mil | itary/Ammunition | , | - | | | |
| | 11. ☐ Other (Specify) 1 | 1. 🗆 Ele | ctrical Conductors | | | | | |
| | | | nsformers | L | <u></u> | 4 | | |
| | | | ity Companies | 000020 | nn 10 o | | | |
| | | | nitary/Refuse | 000020 | JUN 10 81 | | | |
| | | 5. 🗆 Pho | | | | | | |
| | | | /Hospital | | | | | |
| | | 7. 🗆 Unl | | | US EPA RECORDS CENTE | R REGION 5 | | |
| | 1 | 8. 🗆 Oth | ier (Specify) | | i (\$6)[[\$1666 [[]]6 [1588 []]60] | \$111 2 1151 1651 | | |

| | Notification of Hazardous Waste 3 | Side Two | | | | | | |
|------|--|--|--|---|--|--|--|--|
| F | Waste Quantity: | Facility Type | Total Facility Wast | Total Facility Waste Amount | | | | |
| | Place an X in the appropriate boxes to indicate the facility types found at the site. | 1. □ Piles | cubic feet | | | | | |
| | In the "total facility waste amount" space | 2. 🗆 Land Treatment | gallons 500 - (1 | 000) & | | | | |
| | give the estimated combined quantity | 3. □ Landfill 4. □ Tanks | Total Facility Area | | | | | |
| | (volume) of hazardous wastes at the site using cubic feet or gallons. | 5. Impoundment | square feet | | | | | |
| | In the "total facility area" space, give the | 6. Underground Injection | square reet | | | | | |
| | estimated area size which the facilities occupy using square feet or acres. | 7. □ Drums, Above Ground 8. □ Drums, Below Ground | acres | | | | | |
| | coup, coming offers and of severe | 9. Dother (Specify) Spill | | | | | | |
| | Known, Suspected or Likely Releases t | | | | | | | |
| • | Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment. | | | | | | | |
| | Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so. | | | | | | | |
| H | Sketch Map of Site Location: (Optional Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location. | | | | | | | |
| | Description of Site: (Optional) Describe the history and present conditions of the site. Give directions to | Incident reported dir | Incident reported direct to Ohio Environmental | | | | | |
| | the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions. | Protection Agency. Corrective actions carried out as directed. | | | | | | |
| J | Signature and Title: The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing | Name Robert R. Kovalak Street 1099 Ivanhoe Road City Cleveland State | Ohio z _{ip Code} 44110 | □ Owner, Present□ Owner, Past□ Transporter□ Operator, Presen | | | | |
| | notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required | Signature Signature | Date (. 15/8) | Operator, Past Other Department En | | | | |